



# ARLINGTON, TEXAS

## COMMUNITY SERVICES DEPARTMENT

### Proposal Evaluation CDBG – Public Services

Organization Name:	
Program Name:	
Amount Requested:	Score:
Reviewer's Name:	Date:

Section 1: Organizational Capacity and Experience		30 Points	
	Value	Score	
<i>Organizational History and Capacity</i>			
How well has the application described the organization's program history?	3		
Is the mission and experience of the agency consistent with the services proposed?	3		
Based on the applicant's response, how experienced is the program staff in administering the proposed program?	3		
To what extent is the applicant experienced with federal grants management (including City of Arlington CDBG funds)?	3		
How adequately does the agency's current and proposed organizational structure and staffing lend itself to the ability to provide the services outlined in the proposal? See Program-Specific Organizational Chart in Tab C.	3		
Using the information provided in Tab C, does the information on the organizational chart match the resumes that are included? Are there resumes included for the positions listed on the budget forms?	3		
<i>Performance and Monitoring</i>			
Did the applicant meet the planned number of clients served? If not, did the applicant adequately explain why? Did the applicant adequately describe any concerns found during their last monitoring visit? Did the applicant complete all mandated corrective actions? If not, did the applicant adequately describe why? If applicant has never provided this service, do they adequately describe the results of a similar project?	3		
Has the applicant ever been required to pay back Federal funds for violation of regulations? If not, award full three points. If so, award zero points.	3		
<i>Board Capacity</i>			
How well has the applicant described the organization's requirements to be a board member? Does the process for determining the membership needs of the board adequately show an attempt to recruit diverse board members? Are board members adequately trained and oriented to the agency?	3		
How well does the organization's Board of Directors represent the clients served by the organization? (Tab C)	3		
Section 1 Subtotal		30	

Section 2: Evidence of Need/Non-Duplication and Collaboration		30 Points	
	Value	Score	
<b>Priorities</b> – Does the program meet a <i>City of Arlington Consolidated Plan High Priority</i> objective? If yes, award 3 points. If the objective is a medium priority, award 2 points. If the objective is a low priority, award 1 point. If the program does not meet any objective, award 0 points.	3		
<b>Target Population</b> – How well does the applicant describe the target population (size, demographics, location, etc.)? Does the applicant provide a profile of a typical client? Is the proportion of the target population served by the CDBG funded program adequate?	5		

<b>Need</b> – How well did the applicant demonstrate a need for the proposed program? Is the statistical data current? Did the applicant provide sources for their data? Did the applicant adequately describe how the need has changed in the past 3 to 5 years?	10	
<b>Service Area</b> – If the program is housed outside of Arlington, how well does the applicant describe how it will ensure service to the Target Population portion of the program funded by the City of Arlington? If the program is located in Arlington award the full three points.	3	
<b>Non-Duplication</b> – Did the applicant adequately describe how the proposed service is different or unique from other similar programs? If it is proven that there are no other equivalent services, award the applicant 5 points.	3	
<b>Collaboration</b> – How well does this program collaborate with other Public Service programs in the City of Arlington to provide this service?	3	
<b>Financial Leverage</b> – Has the applicant applied for and/or secured funding from other sources to support the majority (51% or more) of the total program cost?	3	
<b>Section 2 Subtotal</b>	30	

<b>Section 3: Statement of Work/Performance Objectives</b>		<b>30 Points</b>
	Value	Score
<b>Work Plan</b> – How sufficient is the applicant's plan regarding program design and development, and the implementation of the proposed program, including how adequately did the applicant provide the following information: <ul style="list-style-type: none"> <li>• service activity plan of action for each activity;</li> <li>• intake procedures and eligibility documentation;</li> <li>• program location(s) and hours of operation;</li> <li>• outreach plan for clients and volunteers;</li> <li>• use of volunteers to supplement paid staff;</li> <li>• program evaluation plan; and</li> <li>• program specific procedures and guidelines.</li> </ul> How well does the work plan reflect a complete and realistic plan of action to complete the work outlined in the RFP?	10	
<b>Timeline</b> – How well did the applicant provide a detailed timeline that reflects program activities (benchmarks) and events that will occur during each quarter of the award period? Has the applicant included time for implementation and evaluation of the program?	5	
<b>Service Activity Table</b> – How sufficient are the objectives of the proposed program? Are the objectives specific, measurable, achievable, realistic, and time-specific? How well does the Service Activity Table describe the Service Activity? Are the Units of Service defined in measurable terms? Does the Cost per Unit of Service seem reasonable?	5	
<b>Performance Measurement System</b> – Are program outcomes consistent with the goals which address the described need? Did the applicant adequately complete the Performance Measurement System? Does the Performance Measurement System include measurable outcomes?	10	
<b>Section 3 Subtotal</b>	30	

<b>Section 4: Budget and Budget Narrative</b>		<b>10 Points</b>
<b>Program Budget</b> – Is the proposed budget complete and all arithmetic correct?		
<b>Budget Narrative</b> –Is the amount of administrative overhead consistent with definition and clearly justified vs. direct service costs?	7	
<b>Fiscal Management</b> – Did the applicant describe an adequate overall fiscal management system?	3	
<b>Section 4 Subtotal</b>	10	

Additional Items of Consideration		
	Yes	No
<b>Priorities</b> – Does the program meet a <i>City of Arlington Council Priority</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priorities</b> – Does the program address an issue identified by <i>the United Way Assessment</i> as a Priority Arlington Issue?	<input type="checkbox"/>	<input type="checkbox"/>
How well did the applicant follow the application guidelines:		
• Is the cover sheet complete?	<input type="checkbox"/>	<input type="checkbox"/>
• Is the application checklist complete?	<input type="checkbox"/>	<input type="checkbox"/>
• Is the applicant information page complete?	<input type="checkbox"/>	<input type="checkbox"/>
• Did the applicant follow the page limit?	<input type="checkbox"/>	<input type="checkbox"/>
• Did the applicant use the correct font size	<input type="checkbox"/>	<input type="checkbox"/>
• Did the applicant follow the margin limit?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Reviewer's Comments:</b>		